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## APPLICANTS

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\*\* CONTINUING DATA *and none*\*\* FOREIGN APPLICATIONS *and none*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

09/09/2005

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>CD</i> Examiner's Signature <i>CD</i> Initials				

ADDRESS  
28211

## TITLE

Cross-feature analysis

FILING FEE RECEIVED 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ). <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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